



CITY OF HOUSTON
OFFICE OF BUSINESS OPPORTUNITY

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MWSBE/PDBE CERTIFICATION APPLICATION
SUPPORTING DOCUMENTATION CHECKLIST

MWSBE/PDBE SUPPORTING DOCUMENTATION ITEM	BUSINESS STRUCTURE			
	SP	PART	LLC	CORP
Disability Affidavit and an accompanying letter from a medical doctor who has been certified in the State of Texas for non-service connected disabled veterans only.	X	X	X	X
Documented proof of place of business/operations (i.e. signed lease agreement or property tax statement) including office space, warehouse, and/or storage facility	X	X	X	X
For Suppliers: List of product lines carried	X	X	X	X
Birth Certificate, Passport, Naturalization Papers, Tribal Roll Card, Tribal Voter Registration Certificate or permanent resident card for each minority/woman owner	X	X	X	X
Certification of Authority of do Business in Texas (for out-of-state businesses)	X	X	X	X
Company Balance Sheet		X	X	X
For Supplier: List of distribution equipment owned and/or leased	X	X	X	X
Signed loan and security agreements, and bonding forms	X	X	X	X
For service connected disabled veterans; a disability rating letter from the Department of Veterans Affairs or a disability determination from the Department of Defense demonstrating a service-connected disability.	X	X	X	X
For HUB firms: Copies of Texas Drivers License or Texas State ID, and State of Texas - County Appraisal District Property (Homestead) Tax Statement for each minority and woman owner with 5% or more ownership and copy of official Federal Employee Identification Number paperwork	X	X	X	X
Licenses, license renewal forms, permits, and haul authority forms	X	X	X	X
List of equipment and vehicles owned and/or leased with documented proof of purchase/lease agreements (i.e. receipts of purchase, titles, VIN numbers, and insurance cards)	X	X	X	X
DBE/ACDBE and SBA 8(a), SDB, MBE/WBE certifications, denials, and/or decertifications	X	X	X	X
Signed and notarized Affidavit of Certification	X	X	X	X
Signed and notarized Affidavit of Non-Interest for each owner	X	X	X	X
Customer references, including contact name and phone number, for whom work has been performed.	X	X	X	X
In business for 6 months prior to application date or company invoice and proof of payment if business is less than 6 months old.	X	X	X	X
Company Federal tax returns filed by the firm and its affiliates with related schedules, for the past 3 years		X	X	X
Official Certificate of Partnership		X		

SP=Sole Proprietorship, PART=Partnership, LLC=Limited Liability Company and CORP=Corporation

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Documented proof of contributions used to acquire ownership for each owner	X	X	X	X
Resumes for all owners, officers of firm and key personnel of the applicant firm	X	X	X	X
Corporate bank resolution and bank signature cards		X	X	X
Original and any amended Partnership Agreements		X		
Proof of Vendor/Supplier Registration with the City of Houston Strategic Purchasing Division	X	X	X	X
Personal tax returns and all schedules and all pages for each minority/woman owner for the past three years AND past three years returns for affiliate companies owned.	X			
Assumed name certificate (DBA)	X			
Bank authorization and signatory cards	X	X	X	X
Member's Agreement, Rules and Regulations or Operating Agreement and any amendments			X	
Official Articles of Incorporation				X
Both sides of all corporate stock certificates and your firm's stock transfer ledger				X
Current Minutes of all stockholders and board of directors meetings				X
Corporate By-Laws and any amendments				X
Official Articles of Organization or Certificate of Formation			X	

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